

DSS Number:

DSS-215
Rev. (01/87)

COMMONWEALTH OF KENTUCKY
CABINET FOR FAMILIES AND CHILDREN
DEPARTMENT FOR COMMUNITY BASED SERVICES

CONSENT TO ADOPTION

BE IT KNOWN by these present that _____ have petitioned the court to adopt _____ born on _____ as
shown on Birth Certificate Number _____ ; and that said child was committed to the Cabinet for Families and Children on
by order of _____ Circuit Court and it appearing that said child was placed in the adoptive home of _____ , who reside at
and it further appearing that the adoption of _____ by _____ would be in the best interests of said child:

NOW THEREFORE, by the authority vested in me by the Cabinet for Families and Children, Commonwealth of Kentucky,
I, _____ , do hereby approve and consent to the adoption of _____ by relinquishing legal custody to said child
in event the adoption of said child is ordered and adjudged according to the procedures provided by law.

WITNESS MY HAND, This _____ day of _____ , .

Family Services Office Supervisor
CABINET FOR FAMILIES AND CHILDREN

Subscribed and sworn to before me by _____ this _____ day of _____ , .

My commission expires _____

Notary Public _____ Kentucky